

FORM INSP
Rev 05/11

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
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Inspection Date:
05/30/2014

Document Number:
673703677

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>436565</u>	<u>436568</u>	<u>Sherman, Susan</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>96340</u>
Name of Operator:	<u>WIEPKING-FULLERTON ENERGY LLC</u>
Address:	<u>4600 S DOWNING ST</u>
City:	<u>ENGLEWOOD</u> State: <u>CO</u> Zip: <u>80113</u>

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED
- INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
Halde, Kerry	(719) 340-0329	haldesand@centurytel.net	
Herian, Tim	(316) 655-9200	tth308@hotmail.com	
Fincham, Jack	(303) 906-3335	fincham4@msn.com	

Compliance Summary:

QtrQtr: SWSE Sec: 24 Twp: 10S Range: 56W

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
436565	WELL	XX	03/26/2014		073-06586	Ma-State # 12	DG <input checked="" type="checkbox"/>

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>1</u>	Wells: <u>1</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>1</u>	Separators: <u>1</u>	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>1</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: <u>1</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
DRILLING/RECOMP	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 436565

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AV: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AV: _____ **Comment:**

CA: **Date:** _____

Wildlife BMPs:

BMP Type	Comment
Storm Water/Erosion Control	<p>BMP Plan</p> <p>Wiepking-Fullerton Energy, L.L.C. 4600 S. Downing St. Englewood, CO 80113 303-789-1798 303-761-9067 (fax)</p> <p>Certification to Discharge Under CDPS General Permit COR-03000 Stormwater Discharges Associated with Construction</p> <p>Certification Number COR 39788</p> <p>Ma-State # 12 well T10S, R55W Sec. 24: SW1/4SE1/4 Lincoln County, Colorado</p> <p>Description of Well Site and Construction Area 1-3 acre site with access road for drilling of oil and gas well. Terrain is flat with native grass and sagebrush. Surface Roughening will be used on low side of drill site to reduce speed of runoff, increase infiltration, reduce erosion, trap sediment and prepare soil for reseeding. Shallow surface water depression which is dry located 417' West from edge of well pad. Dirt berm will be placed on West and North sides of well pad to protect this area. Drilling pits closed and reclaimed within 3 months weather permitting. To prevent soil erosion site will be disked and manure spread. Topsoil will be separated and spread on drill site as final operation before reseeding operations which will be completed within 6 months weather permitting.</p> <p>Stormwater Management Plan (SWMP) is on file in Wiepking-Fullerton Energy, L.L.C. office.</p> <p>Spill Prevention, Control and Countermeasure Plan is on file in Wiepking-Fullerton Energy, L.L.C. office.</p>

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Stormwater:

Comment: _____

Staking:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 436565 Type: WELL API Number: 073-06586 Status: XX Insp. Status: DG

Well Drilling

Rig: Rig Name: Schaal #5 Pusher/Rig Manager: Armando Burciaga
 Permit Posted: SATISFACTORY Access Sign: ACTION REQUIRED

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment:

Surface casing to 331'
 FW pit 39.15910, -103.61052
 Surface water depression W of site is dry. Berm was installed on west and north side of drill pit.

Cement

Cement Contractor

Contractor Name: Consolidated/Kans Contractor Phone: _____

Surface Casing

Cement Volume (sx): 175 Circulate to Surface: YES
 Cement Fall Back: _____ Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____ Good Return During Job: _____

Production Casing

Cement Volume (sx): _____ Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): _____ Cement Volume (sx): _____

Good Return During Job: _____ Cement Type: _____

Comment: Cement weight 14.8

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well:	Lat	Long
DWR Receipt Num: _____	Owner Name: _____	GPS : _____

Field Parameters: _____

Sample Location: _____

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: RANGELAND

Comment: _____

1003a. Debris removed? _____ CM _____

CA _____ CA Date _____

Waste Material Onsite? _____ CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? _____ CM _____

CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? _____ CM _____

CA _____ CA Date _____

Guy line anchors removed? _____ CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: RANGELAND

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation _____ Well Release on Active Location Multi-Well Location

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Slope Roughening	Pass	Ditches	Pass			
Berms	Pass					
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

S/A/V: SATISFACTOR Corrective Date: _____

Y

Comment: Shallow surface water depression 417' to the west per COA

CA: _____

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
673703720	WF MaState 12 well drilling	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3379124
673703721	WF MaState 12 well drilling	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3379125
673703722	WF MaState 12 well drilling	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3379126
673703723	WF MaState 12 well drilling	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3379127
673703724	WF MaState 12 well drilling	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3379128